



PAIN MANAGEMENT - ADULT

I. PURPOSE

To define the prehospital use of analgesics for pain management to patients with moderate to severe pain.

II. FIELD ASSESSMENT/TREATMENT INDICATORS

The prehospital use of analgesics should be considered for the following patients who have a Glasgow Coma Score (GCS) of 15 or at a baseline mentation and have a pain score of five (5) or higher on a scale of 1 - 10:

- Acute traumatic injuries
- Acute abdominal/flank pain
- Burn injuries
- Cancer pain
- Sickle Cell Crisis

Special consideration must be given to the type of pain, the patient's overall condition, allergies, current medical conditions, and drug contraindications when deciding if pain management is appropriate and which pain medication to be administered.

III. BLS INTERVENTIONS

- Attempt to calm, reduce anxiety, and allow patient to assume position of comfort.
- Utilize ice, immobilize and splint the affected area as indicated.
- Assess patients level of pain using the pain scale from 1 - 10 with 10 being the worst pain.
- Administer oxygen as clinically indicated per ICEMA Reference # 9010 - General Patient Guidelines.

IV. ALS INTERVENTIONS

- Perform activities identified in the BLS Interventions.
- Consider early vascular access.
- Place on cardiac monitor. Obtain capnography, monitoring waveform and numerical value.
- Monitor and assess patient vital signs prior to administration of any analgesic.
- For treatment of pain as needed with a blood pressure of greater than 100 systolic:
 - Fentanyl per ICEMA Reference # 7040 - Medication - Standard Orders, **or**
 - Ketamine per ICEMA Reference # 7040 - Medication - Standard Orders.
- For treatment of pain as needed with a blood pressure less than 100 systolic:
 - Ketamine per ICEMA Reference # 7040 - Medication - Standard Orders.
- After administration of any pain medication, continuous monitoring of patients ECG and capnography is required.
- Reassess and document vital signs, capnography, and pain scores every five (5) minutes.

V. SPECIAL CONSIDERATIONS

- Once a pain medication has been administered via route of choice, changing route (i.e., from IM to IV) requires base hospital order.
- Shifting from one analgesic while treating a patient requires base hospital contact.

Pain management should only be considered for patients that have a pain score of five (5) or higher on the below scale of 1 - 10.

This is the official pain scale to be used in patient assessment and documented on the PCR.



VI. REFERENCES

<u>Number</u>	<u>Name</u>
7040	Medication - Standard Orders
9010	General Patient Guidelines